

## FINANCIAL AFFIDAVIT

CJA-23

IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT OR OTHER COURT SERVICES WITHOUT PAYMENT OF FEE REV 1/90

IN UNITED STATES  
IN THE CASE OF☐ MAGISTRATE ☐ DISTRICT ☐ APPEALS COURT or ☐ OTHER PANEL (Specify below)

FOR

AT

VS.

CLERK OF COURT  
SEP 24 2014

PERSON REPRESENTED (Show your full name)

JESUS ALEJANDRO Chavez  
PHONE:

CHARGE/OFFENSE (describe if applicable &amp; check box →)

☐ Felony  
☐ Misdemeanor

- 1 ☐ Defendant—Adult  
 2 ☐ Defendant—Juvenile  
 3 ☐ Appellant  
 4 ☐ Probation Violator  
 5 ☐ Parole Violator  
 6 ☐ Habeas Petitioner  
 7 ☐ 2255 Petitioner  
 8 ☐ Material Witness  
 9 ☐ Other (Specify) \_\_\_\_\_

## DOCKET NUMBERS

Magistrate

District Court

Court of Appeals

## ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY

## EMPLOYMENT

Are you now employed? ☐ Yes ☐ No ☐ Am Self Employed

Name and address of employer: \_\_\_\_\_

IF YES, how much do you  
earn per month? \$ \_\_\_\_\_IF NO, give month and year of last employment  
How much did you earn per month \$ \_\_\_\_\_If married is your Spouse employed? ☐ Yes ☐ NoIF YES, how much does your  
Spouse earn per month \$ \_\_\_\_\_If a minor under age 21, what is your Parents or  
Guardian's approximate monthly income \$ \_\_\_\_\_

## OTHER INCOME

Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? ☐ Yes ☐ No

RECEIVED

SOURCES

IF YES, GIVE THE AMOUNT  
RECEIVED & IDENTIFY \$ \_\_\_\_\_  
THE SOURCES \_\_\_\_\_

## CASH

Have you any cash on hand or money in savings or checking account ☐ Yes ☐ No IF YES, state total amount \$ \_\_\_\_\_

## PROPERTY

Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? ☐ Yes ☐ No

VALUE

DESCRIPTION

IF YES, GIVE VALUE AND \$  
DESCRIBE IT \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## DEPENDENTS

MARITAL STATUS

☐ SINGLE☐ MARRIED☐ WIDOWED☐ SEPARATED OR  
DIVORCEDTotal  
No. of  
Dependents

List persons you actually support and your relationship to them

OBLIGATIONS  
& DEBTSDEBTS &  
MONTHLY  
BILLS(LIST ALL CREDITORS,  
INCLUDING BANKS,  
LOAN COMPANIES,  
CHARGE ACCOUNTS,  
ETC.)APARTMENT  
OR HOME:

Creditors

Total Debt

Monthly Payt.

\_\_\_\_\_

\$

\$

\_\_\_\_\_

\$

\$

\_\_\_\_\_

\$

\$

\_\_\_\_\_

\$

\$

SIGNATURE OF DEFENDANT  
(OR PERSON REPRESENTED)

I certify the above to be correct.



WARNING: A FALSE OR DISHONEST ANSWER TO A QUESTION IN THIS AFFIDAVIT MAY BE PUNISHABLE BY FINE OR IMPRISONMENT, OR BOTH.